

United States District Court

District of the Northern Mariana Islands

Nenita G.Africa, Adona D.Carino
Emma S.Escobar, Emelita S.Magayaga
Asuncion Sapo,

V.

SUMMONS IN A CIVIL CASE

COMMONWEALTH GARMENT MANUFACTURING,
INC.dba Mirage Saipan Co., Ltd.,

CASE NUMBER: CV 08 - 00 1 FILED
Clerk
District Court

JUN 12 2008

RECEIVED For The Northern Mariana Islands
By (Deputy Clerk)

MAR 12 2008

US MARSHALS SERVICE-CNMI

TO: (Name and address of Defendant)

COMMONWEALTH GARMENT MANUFACTURING
INC.dba Mirage Saipan Co., Ltd.,
P.O.BOX 500741
Saipan, MP 96950

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Attorney Stephen C.Woodruff
2/F Hill Law Office Bldg., Susupe
P.O. Box 500770
Saipan, MP 96950
Tel: 235-3872
Fax: 235-3873

an answer to the complaint which is served on you with this summons, within 20 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

MAR 11 2008

Galo L. Perez

CLERK

(By) DEPUTY CLERK

DATE

AO 440 (Rev. 10/93) Summons in a Civil Action

RETURN OF SERVICE

Service of the Summons and complaint was made by me ⁽¹⁾	DATE 6/12/08
NAME OF SERVER (PRINT) Lee Bengun	TITLE District Security Officer

Check one box below to indicate appropriate method of service

- ☐ Served personally upon the defendant. Place where served: _____
- ☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.

Name of person with whom the summons and complaint were left: _____

- ☒ Returned unexecuted: failed to provide USM 285's contact information for service to include a mpa.

☐ Other (specify): _____

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL
--------	----------	-------

DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on

N/A

Date

Signature of Server

Bengun DSO 8841

US Marshal D/MSI

P.O. Box 500570 Scipio, MP 96950

Address of Server

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	NERITA G. AFRECA, ADONA D. CARINO EMMA S. ESCOBAR, Emelita S. Magayaga ASUNCION SARD.	COURT CASE NUMBER	CU-08-0014
DEFENDANT	Commonwealth Garment Manufacturing INC. dba Mirage Saipan CO. LTD.	TYPE OF PROCESS	Civil - Summons
SERVE ➡ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Commonwealth Garment Manufacturing INC. Mirage Saipan CO. LTD ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) P.O. Box 500741 Saipan MP. 96950		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	01
ATTORNEY Stephen C. Woodruff 2/F Hill Law Office Bldg, Susupe Saipan, MP 96950 Tel. 235-3872 Fax: 235-3873	Number of parties to be served in this case	01
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternative Addresses, All Telephone Numbers, and Estimated Times Available For Service):
FoldFILED
Clerk
District Court

Fold

JUN 12 2008

For The Northern Mariana Islands
By _____
(Deputy Clerk)

Signature of Attorney or other Originator requesting service on behalf of:

☐ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 01	District of Origin No. 005	District to Serve No. 005	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i> CIDVSM # 3086	Date 6-12-08
---	---------------------	-------------------------------	------------------------------	--	-----------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service _____ Time _____ am
pm

Signature of U.S. Marshal or Deputy

[Signature] DSO 8841

Service Fee N/A	Total Mileage Charges (including endeavors) N/A	Forwarding Fee N/A	Total Charges 0	Advance Deposits 0	Amount owed to U.S. Marshal or 0	Amount of Refund 0.00
--------------------	---	-----------------------	--------------------	-----------------------	-------------------------------------	--------------------------

REMARKS:

Failed to provide usm 285 & contact information
For service to include map.